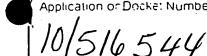
## PATENT APPLICATION FEE DETERMINATION RECORD



| Effective October 1, 2004                                                             |                                                       |                                             |                            |                                          |                                              |                             |                                     |                                         |                                                  |      | 544                 | <i>l</i>               |
|---------------------------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------|----------------------------|------------------------------------------|----------------------------------------------|-----------------------------|-------------------------------------|-----------------------------------------|--------------------------------------------------|------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                        |                                                       |                                             |                            |                                          |                                              |                             |                                     | SMALL E                                 |                                                  | .OF. | OTHER<br>SMALL E    |                        |
| ТО                                                                                    | TAL CLAIMS                                            | ,                                           |                            |                                          | ·                                            |                             |                                     | RATE                                    | ·FEE                                             |      | RATE                | FEE                    |
| FOR .                                                                                 |                                                       |                                             | NUMBER FILED               |                                          | NUMBER EXTRA                                 |                             |                                     | BASIC FEE                               |                                                  | OR   | BASIC FEE           | 956a                   |
| TOTAL CHARGEABLE CLAIMS                                                               |                                                       |                                             | 22 minus 20=               |                                          | . 2                                          |                             |                                     | XS 9=                                   |                                                  | OR   | XS18=               | 36.°°                  |
| INDEPENDENT CLAIMS                                                                    |                                                       |                                             | / minus 3 =                |                                          | •                                            |                             |                                     | X44 =                                   |                                                  | OR   | X8 <b>8</b> =       |                        |
| MU                                                                                    | LTIPLE DEPEN                                          | DENT CLAIM PF                               | RESENT                     |                                          |                                              |                             |                                     | +150=                                   |                                                  | OR   | ÷300:=              |                        |
| - 11                                                                                  | the difference                                        | in column 1 is l                            | ess than zero, enter "0" i |                                          |                                              | olumn 2                     |                                     | TOTAL                                   |                                                  | OR   | TOTAL               | 986                    |
| CLAIMS AS AMENDED - PART II                                                           |                                                       |                                             |                            |                                          |                                              |                             |                                     | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                                                  |      |                     |                        |
| NT A                                                                                  | · · · · · · · · · · · · · · · · · · ·                 | (Column 1) CLAIMS REMAINING AFTER           |                            | (Colur<br>HIGH<br>NUMI<br>PREVIO<br>PAID | IEST<br>BER<br>DUSLY                         | PRESENT<br>EXTRA            | RATE                                | <u> </u>                                | ADDI-<br>TIONAL<br>FEE                           |      | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT                                                                             | Total                                                 | AMENDMENT                                   | Minus                      | ##                                       | <u>,,                                   </u> | =                           | ]                                   | XS 9=                                   |                                                  | OR   | XS18=               |                        |
| WEN                                                                                   | Independent                                           | *                                           | Minus                      | 444                                      |                                              | =                           |                                     | X43=                                    |                                                  | ÖR   | X86=                |                        |
| ₹                                                                                     | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM        |                                             |                            |                                          |                                              |                             | 1                                   | +145=                                   |                                                  | OR   | +290=               |                        |
|                                                                                       |                                                       |                                             |                            |                                          |                                              |                             |                                     | TOTAL<br>ADDIT, FEE                     | <del>                                     </del> | ا ا  | TOTAL<br>ADDIT, FEE |                        |
| terusen                                                                               | the trail of the and the base of the second sections. | )<br>)                                      | AUUII. PEE                 | **************************************   | talidadania satur                            | t surrent to the Control of | tick to an extension and the second |                                         |                                                  |      |                     |                        |
| MENDMENT B                                                                            | . स्थापः प्रकारकार्यक्रम्यः स्थितिकः                  | (Column 1) CUAIMS REMAINING AFTER AMENDMENT |                            | (Colui<br>HIĞI<br>NUM<br>PREVI<br>PAID   | IEST                                         | PRESENT                     |                                     | RATE                                    | -ADDI=<br>TIONAL<br>FEE                          |      | RATE                | TIONAL<br>FEE          |
|                                                                                       | Total                                                 |                                             | Minus                      | **                                       |                                              | =                           |                                     | X\$ 9=                                  | <u>.</u>                                         | OR   | X\$18=              |                        |
|                                                                                       | Incependent                                           |                                             | Minus                      | ***                                      |                                              | =                           | 1                                   | X43=                                    |                                                  | OR   | X86=                | <u> </u>               |
| <b>▼</b>                                                                              | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM        |                                             |                            |                                          |                                              |                             | ٢                                   | +145=                                   |                                                  | OR   | +290=               |                        |
|                                                                                       |                                                       |                                             |                            |                                          |                                              |                             |                                     | TOTAL<br>ADDIT. FEE                     |                                                  | OR   | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)                                                      |                                                       |                                             |                            |                                          |                                              |                             |                                     |                                         |                                                  | 1    |                     |                        |
| ENT C                                                                                 |                                                       | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                            | NUM<br>PREVI                             | HEST<br>MBER<br>OUSLY<br>FOR                 | PRESENT<br>EXTRA            |                                     | RATE                                    | ADDI-<br>TIONAL<br>FEE                           |      | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT                                                                             | Total                                                 |                                             | Minus                      | **                                       |                                              | = .                         |                                     | X\$ 9=                                  | <u></u>                                          | OR   | X\$18=              | <u> </u>               |
| MEN                                                                                   | Independent                                           | •                                           | Minus                      | ***                                      | ·                                            | -                           | 1                                   | X43=                                    | • •                                              | OR   | X86=                |                        |
| Ā                                                                                     | FIRST PRESE                                           | ENTATION OF M                               | IULTIPLE DE                | PENDEN                                   | T CLAIN                                      |                             | لـ                                  | +145=                                   |                                                  | OR   | +290=               |                        |
| • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |                                                       |                                             |                            |                                          |                                              |                             |                                     | TOTAL                                   | <del> </del>                                     |      | ATOT.               | -                      |

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

ADDIT. FEE

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

<sup>\*\*\*</sup>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.